

Per California Code of Regulations, title 2, section 548.5, the following information will be posted to CalHR's Career Executive Assignment Action Proposals website for 30 calendar days when departments propose new CEA concepts or major revisions to existing CEA concepts. Presence of the department-submitted CEA Action Proposal information on CalHR's website does not indicate CalHR support for the proposal.

A. GENERAL INFORMATION

1. Date

2020-12-11

2. Department

California Department of Social Services (CDSS)

3. Organizational Placement (Division/Branch/Office Name)

Community Care Licensing Division (CCLD)

4. CEA Position Title

Assistant Deputy Director- Residential Programs

5. Summary of proposed position description and how it relates to the program's mission or purpose.
(2-3 sentences)

Serving under the direct supervision of the Deputy Director of CCLD, the CEA Range B, Assistant Deputy Director (ADD) - Residential Program is a key member of the Division's executive team. The ADD is responsible for providing overall guidance to CDSS executive leadership and the Administration to inform statewide Adult and Senior Care and Children's Residential Licensing Program Policy, representing the Department with legislative partners, advocates and other stakeholders, and for ensuring effective operations the Residential Licensing Programs throughout the State.

6. Reports to: (Class Title/Level)

Deputy Director / CEA C

7. Relationship with Department Director (*Select one*)

- ☐ Member of department's Executive Management Team, and has frequent contact with director on a wide range of department-wide issues.
- ☒ Not a member of department's Executive Management Team but has frequent contact with the Executive Management Team on policy issues.

(*Explain*): The CEA regularly consults with and advises the Deputy Director, Chief Deputy Director, and Director on program matters.

8. Organizational Level (*Select one*)

- ☐ 1st ☐ 2nd ☒ 3rd ☐ 4th ☐ 5th (mega departments only - 17,001+ allocated positions)

B. SUMMARY OF REQUEST

9. What are the duties and responsibilities of the CEA position? Be specific and provide examples.

Serving under the direct supervision of the Deputy Director of CCLD, the CEA Range B, Assistant Deputy Director (ADD) -Residential Programs is a key member of the Division's executive team.

The position is responsible for providing overall guidance and analysis to CDSS executive leadership and the Administration to inform statewide Adult and Senior Care and Children's Residential Licensing Program Policy. This position represents the Department in Legislative discussions, statewide policy discussions, and meetings with advocates; sets major policy initiatives for the Program; and anticipates and guides the development of budget proposals. The ADD is responsible for the day to day administration of the both the Children's Residential and the Adult/Senior Care Licensing Programs, responsible for overseeing 610 staff in 18 regional offices throughout the State. Major policy issues are interpreted and addressed by the ADD, in response to specific situations that arise and questions and issues raised by the field staff, licensees, provider organizations, stakeholder/advocates and internal and external stakeholders. The ADD is authorized to act on behalf of the Deputy Director of CCLD in the absence of that official, and to authorize and settle administrative actions sought by the Department against licensed facilities.

The ADD guides a team, including two CEA A's, one for Children's Residential and one for Adult/Senior Care, to develop and oversee the implementation of the Residential Licensing Program policies, goals, objectives, and procedures. Works closely with the corresponding program policy sections within the Division and Department to oversee and negotiate policy decisions with significant program impact. Confers, recommends and advises the Deputy Director on needed regulation policies and procedural changes which impact the Licensing Program and CCLD. The ADD coordinates efforts with other CDSS programs serving the residents of facilities, including the Children's and Family Services Division (Child Welfare), Adult Programs (IHSS and Adult Protective Services), and the Disability Determinations Services Division to ensure continuity of care.

Provides overall direction to the management team and regional offices responsible for the administration and implementation of regulations, policy, and procedures; ensures uniform enforcement of regulations in regional offices including pursuit of administrative action against problem facilities using statewide procedures and standards; reviews and approves administrative actions against facilities violating statutes and regulations. Provides policy clarification to regional offices on existing statutes, regulations, policies, procedures and interpretive material. Ensures overall data collection and analysis of outcomes to inform decision making and policy.

Represents the program with legislative staff, staff from other departments or governmental agencies and the media on issues affecting the Licensing of Residential Program. May testify on critical or sensitive program issues before legislative committees. Communicates with advocacy groups, the general public, and private organizations to promote and enhance the program's goals and objectives. Contact with these associations includes complaint resolution, negotiations regarding decisions and directions taken by the Division and participation on work groups to address specific issues and develop statewide policy or new programs.

B. SUMMARY OF REQUEST (continued)

10. How critical is the program's mission or purpose to the department's mission as a whole? Include a description of the degree to which the program is critical to the department's mission.

- ☒ Program is directly related to department's primary mission and is critical to achieving the department's goals.
- ☐ Program is indirectly related to department's primary mission.
- ☐ Program plays a supporting role in achieving department's mission (i.e., budget, personnel, other admin functions).

Description: The mission of the CDSS is to serve, aid, and protect needy and vulnerable children and adults in ways that strengthen and preserve families, encourage personal responsibility, and foster independence.

To that end, the primary function of the CCLD is to oversee the health and safety of our approximately 70,000 licensed adult and children's facilities throughout California. These facilities include those that serve the most vulnerable in our society. The critical nature of the work performed by this Division helps to prevent the neglect, abuse and possible death of those we are charged with protecting.

The Adult and Senior Care and Children's Residential Licensing Programs are not only a top priority for the Department, but also for the Administration. The Master Plan for Aging focuses on ensuring there are quality care opportunities for seniors and dependent adults throughout California. Once adopted in early 2021, there will be a significant increase in strategies that CCL must participate in to ensure effective implementation of this Plan.

Additionally, with the federal implementation of the Family First Prevention Services Act, there will be a significant workload increase in the Children's Residential Program during this upcoming fiscal year, necessitating a greater policy workload for the team.

B. SUMMARY OF REQUEST (continued)

11. Describe what has changed that makes this request necessary. Explain how the change justifies the current request. Be specific and provide examples.

The CCLD is currently proposing a reorganization to add two additional ADDs (CEA B), for the following functions of the division: Residential Programs, Child Care Program and existing Central Operations. This would bring the Division's total to three ADDs and six CEA A's. Over time, CCLD has experienced not only an increase in oversight authority, but an increase in complexity and demand to respond to disasters, pandemic, and legislation that has stretched the capacity of our current organizational structure. Additionally, new projects have been given to CCLD in recent years, including the upcoming transition of CDE Early Childhood Programs to CDSS, with their associated licensing workload, and the need for migration to new data systems to effectively manage data tracking and reporting requirements. With a division of 1560 employees, we have determined that the span of control for our existing Deputy Director and one ADD is not sustainable.

This current request adds an ADD to oversee the Residential Licensing Program. Residential Licensing has grown over the past several years by roughly 37% over the past seven years. The pending implementation of the Master Plan for Aging and the Family First Prevention Services Act, will result in an increased policy and program workload for CCL. New oversight areas of responsibility that impact field operations and enforcement of health and safety standards in the Adult and Senior Program include the following:

In response to the Developmental Center closures, which involved 75% of the clients moving to facilities licensed by the Department of Social Services (DSS), three new facility types were added with higher standards (e.g. staffing, training) to ensure these clients' needs were met, Adult Residential Care Facilities for Persons with Special Health Needs (ARFPSHNs), Enhanced Behavioral Support Homes (EBSHs) and Community Crisis Homes (CCHs).

DSS currently oversees 91 Adult Residential Care Facilities for Persons with Special Health Needs (ARFPSHNs). This number will increase to 93 by the end of this year, creating an increased level of attention on this crucial facility type that serves the most medically fragile of our persons in care, requiring 24-hour intensive support services. ARFPSHNs require a higher nurse-client ratio than skilled nursing homes.

The number of EBSHs is increasing from 48 to 93 next year. The number of CCHs will also grow from 13 to 29 by next year. This represents an increase of over 40% in the number of these three facility types which require a markedly higher level of supervision.

The following legislation and regulations from 2014-2018 have increased the complexity of issues that the ADD is responsible for.

- SB 856 Statute of 2014, to assist with finding community homes for consumers impacted by the closure of the California Developmental Centers.
- SB 895 Statute of 2015, requires the Department to conduct unannounced visits to certain percentage of facilities; post inspection reports; report on annual inspections; and required licensees to post reporting information in case of a complaint or emergency in the facility and remedy deficiencies within 10 days of notification.
- SB 911 Statute of 2015, increases training requirements for RCFE administrators; increases initial and annual training for direct care staff; requires licensees to assist residents with accessing home health or hospice services as prescribed by the resident's physician and contained in the resident's service plan.
- AB 403 Statute of 2015, provided the statutory framework for the continuum of care reform to ensure services and support provided to children in out of home care are tailored toward the ultimate goal of maintaining a stable permanent family.
- AB 1997 Statute of 2016, Welfare and Institutions Code, and the Health and Safety Code to further refine the continuum of care reform effort.
- AB 404 Statute of 2017, and AB 501 Statute of 2017, implemented the Intensive Services Foster Care Program.
- AB 1930 Statute of 2018, requires a foster family agency that intends to operate an Intensive Services Foster Care program to submit to CDSS a program statement.

Based on some of the recent legislation, three new licensing programs serving children were created and multiple versions of interim licensing standards were developed and implemented, as follows:

- Short Term Residential Therapeutic Program is a residential facility that provides an integrated program of specialized and intensive care and supervision, services and supports, treatment, and short-term, 24-hour care and supervision to children. The care and supervision provided by a short-term residential therapeutic program shall be non-medical, except as otherwise permitted by law. This facility category provides short-term therapeutic intervention and individualized and intensive supervision, supports, and trauma-focused interventions to children with high acuity needs that have been assessed to need the level of care and supervision that is not safely met in a home-based setting.
- Children's Crisis Residential Program is a licensing sub-category of a Short Term Residential Therapeutic Program that is also approved by the State Department of Health Care Services, or a county mental health plan to which the State Department of Health Care Services has delegated approval authority, to operate a children's crisis residential mental health program to serve children experiencing mental health crises as an alternative to psychiatric hospitalization.
- Foster Family Agency Resource Family Approval Program is a family-friendly and child-centered caregiver approval process that combines elements of the current foster parent licensing, relative approval, and approvals for adoption and guardianship processes and replaces those processes.

C. ROLE IN POLICY INFLUENCE

12. Provide 3-5 specific examples of policy areas over which the CEA position will be the principle policy maker. Each example should cite a policy that would have an identifiable impact. Include a description of the statewide impact of the assigned program.

The ADD will have frequent contact with the Deputy Director of the CCLD on policy development, legislative testimony, licensing issues and regional office activities. Communicates with staff of the Central Operations Branch, Policy Branch, other CCLD Programs, the office of the Chief Counsel and various administrative support units. The ADD is heavily involved in the legal issues, particularly adverse actions against facilities. Also, this position has substantial contact with the general public, legislative offices, the media, provider organizations, advocacy groups and a variety of professionals, e.g., attorneys, physicians, architects, etc.

Some examples of policy areas in recent years, which this CEA will be responsible for include:

1. Inspection Process Project: Through the Inspection Process Project (IPP), the CCLD developed inspection tools for statewide use for the Adult and Senior Care Program that are data driven; were reviewed by stakeholders, subject matter experts and California State University, Sacramento (CSUS); and, included feedback from licensee and LPA surveys as well as LPA focus groups. Tools for Child Care and Children's Residential facilities are currently being developed and will be implemented statewide in 2021.

- This impact of the IPP statewide is that it will allow for consistent, thorough inspections across all licensed facility types. The IPP provides actionable information, by generating data on facility compliance as well as noncompliance, giving CDSS a more holistic and accurate picture of facility performance over time. The IPP also creates clear and consistent expectations for licensees to help ensure the health and safety of persons in care. The IPP tools also serve as a vehicle to provide technical assistance to licensees on statutory and regulatory requirements.

2. Regulation Update Regarding Suspension of New Admissions in Residential Care Facilities for the Elderly (RCFE): The regulations clarify statutory requirements (Health and Safety Code Section 1569.545), which permit the Department to order a suspension of new admissions in RCFEs.

- The impact of these regulations is that they serve as a new enforcement tool for CCLD to use when monitoring facility compliance. These regulations will ensure the protection of current and prospective residents of an RCFE because it will provide a motivation for the licensee to immediately resolve serious health, safety, and personal rights violations.

3. Guidance On Coronavirus Disease 2019 (COVID-19) Related To The Critical Role Of Testing, Modification Of Visitation Guidelines, Need For Infection Prevention And Control, And Use Of Face Coverings In Adult And Senior Care Facilities: Provides guidance to Adult and Senior Care (ASC) licensees related to the critical role of testing for COVID-19, modification of visitor guidelines, guidance for vigilant adherence to infection control and prevention practices to prevent the transmission of COVID-19 in ASC facilities, and mandated use of face coverings.

- This guidance impacts all ASC residential facilities throughout the state and serves to assist care providers in responding to these critical COVID-19 related topics, such as infection control and mitigation practices; visitor guidelines; and testing of staff and residents. The Department has made it a priority to serve as a resource to licensees, staff, residents, and their families, offering guidance and technical assistance to ensure the health and safety of persons in care and combat the spread of COVID-19.

4. Regulations for Enhanced Behavioral Supports Homes, Secured Perimeters, and Emergency Interventions. Effective February 10, 2017, California Code of Regulations (CCR), Title 22 regulations have been adopted as follows: Enhanced Behavioral Supports Homes

- These regulations impact the closure of the Developmental Centers by providing another homelike setting option for the displaced residents who are in need of behavioral supports.

5. The California Overdose Treatment Act: describes the specific provisions that must be followed in order to support the emergency use of Naloxone (Narcan) by licensees and staff at adult or senior care facilities.

- This impacts all adult and senior care facilities that serve clients at risk of an opioid related overdose by enabling trained staff to administer this life-saving medicine.

6. Epinephrine Auto-Injectors (EpiPen): provides an overview of the Good Samaritan laws that govern the use of EpiPen auto-injectors describes the specific provisions that must be followed in order to support the emergency use of epinephrine auto-injectors (EpiPen) by licensees and staff at adult or senior care facilities.

- This impacts all adult and senior care facilities by allowing trained staff to administer epinephrine to clients who are having a life threatening, allergic emergency.

C. ROLE IN POLICY INFLUENCE (continued)

13. What is the CEA position's scope and nature of decision-making authority?

The ADD will be responsible for the development and maintenance of policies and procedures to direct program operations, implementation of regulations within the branches, staffing and management functions of the Programs under her or his purview, adverse actions on licensees, and day to day budget decisions. The ADD will inform strategic direction of the programs, major policy decisions, legislative decisions and overall budget decisions.

14. Will the CEA position be developing and implementing new policy, or interpreting and implementing existing policy? How?

The new ADD position will be handling both current and emerging policy. The sheer volume of change activity is more than the current Deputy Director can efficiently and effectively handle without the assistance of an ADD leader. Both the Deputy Director and the ADD will be actively involved in high level discussions with Legislative staff and advocacy groups in the development of forthcoming legislation. Additionally they will be involved with other state departments, the counties, advocacy representatives and legal in the development and promulgation of regulations. Their role in this context will be in the development and negotiation with outside stakeholders on major issues of licensing and enforcement policy.